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Spouse's First Name and Initial	Lasi Name Second Last Name	Home Telephone		17 HE 17 18
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F C O Other eve	empt income? (Submit Schedule)	4. Single	named)	.9
	to make payments to ASUME?	Married filing separately	(Submit spouse's name and s	ocial security number above)
HIGHEST SOURCE OF	lunicipalities or Public Corporations Employee	J. Retired/Pensioner	GOVERN	MENT CONTRACT
H. Federal Govern	nment Employee	K. Self-Employed (Indicate prin	opal TAXPAYER	○ SPOUSÈ
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				1 January , 2009 AND	NDING ON 31 December	2009 DECEAS		Day Note:
axo	ayer's Name	Initial	Last Name	Second Last Name	Taxpayer's Social Security Nu	mber 1 h	Paymer	nt Stamp
			Torres	Cardenales	A. L.T.			
ınt	onio		Tones	-	A.L.T. Date of Birth Si	MARKET TO THE TAXABLE PARTY.		
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Coa	mo PR		Place labe	The state of the s	Spouse's Date of Birth	1 100 1		
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	B.OOF	Resident of Puer	no Rico at t	the end of the year? ottery of Puerto Rico?	(Submit spouse's nar	ne and social securi	ty number at	bove)
1	000	ncome from ra	cetrack win	nings in Puerto Rico?	Head of household (N Single		4 . 1	
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Lar.	MICHEST SOI	IRCE OF INCO	OME:		J. Retired/Pensioner		GOVERNM	ENI CONTRACT
	G Gover	nment, Municip	alities or Pu	ublic Corporations Employee	 K. Self-Employed (Indicate) 	principal	TAXPAYER	O SPOUSE
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Case:17-03283-LTS Doc#:12344-1 Filed:03/13/20 Entered:03/16/20 10:53:57 **Exhibit** Page 3 of 11 33,618 00 38,568 00 40,353 00 PRSoft, Inc. (www.prsoft.com) rum in nere ir you cnoose the optional computation of tax for married individuals living together, filing a joint return and both working. Do not complete Parts 2 and 3, neither lines 15 through, 25 of Part 4, and go to Schedule CO Individual. 4,950 1,785 40,353 Federal Wages Head of household (Not married)
 Single
 Married filing separately (Submit spoke's name and social security number GOVERNMENT CONTRACT O SPORSE O BRGLEY 2011 RETURN O DECEASED DURING THE YEAR. name and social security number above) STATUS AT THE END OF THE TAXABLE YEAR:
Married living with spouse and filing jointly
Married not living with spouse (Not head of household) O TWANTER (05) (03) g (90) (90) (11) O SPANISH (80) (60) (10) (12) (113) (115) 5 (18) (61) (20) (21) (22) (23) (56) O AMENDED RETURN Dividends from corporations and distributions from partnerships not subject to withholding (Schedule F Individual, Part II, line 3B) טוויוסון (Schedule Findividual, Partil, line 1A) (Schedule Findividual, Partil, line 1A) (Schedule Findividual, Partil, line 1A) (29) 1,354 1,521 Fax Withheld Head of household (Not married) Single (Indicate principal Distributions from Individual Retirement Accounts and Educational Contribution Accounts (Submit Schedule F Individual) 2010 Spouse's Social Security Number 2010 ⇒ Fill in here if you choose the optional computation of tax for married individuals Income OSpouse Retired/Pensioner Self-Employed (Indicate industry or business) Home Telephone (787) 000-0000 spouse's Taxpayer's Social Security Spouse's Date of Birth Distributable share on special partnerships profits (Submit Schedule F Individual and Schedule R) FOR CALENDAR YEAR 2010 OR TAXABLE YEAR BEGINNING ON)(24) (Judgment No. INDIVIDUAL INCOME TAX RETURN C. Federal Government Wages (See instructions)... (91) ☐ RETURN WITH CHECK (PLEASE ATTACH CHECK HERE) A.C. T. C. (Submil CHANGE OF ADDRESS Distributable share on profits from corporations of individuals (Submit Schedule FIndividual). (14) Distributions from Governmental Plans (Schedule F Individual, Part V, lines 1C and 1D) Month OD ATTACH ALL YOUR WITHHOLDING STATEMENTS (Forms 499R-2W-2PR, 499R-2CM-2CPR or W-2, as applicable). O Taxpayer Gain (or loss) from sale or exchange of capital assets (Submit Schedule D Individual) . Wages, Commissions, Allowances and Tips 2 Qualified plans and Variable Annuity Contracts (Submit Schedule D Individual) 2010 AND ENDING ON 31 (or loss) from professions and commissions (Submit Schedule M Individual) Dey. ェー Dividends from Capital Investment or Tourism Fund (Submit Schedule Q1) Dividends from Capital Investment (Schedule H Individual, Part II, line 12)
 Income from annuities and pensions (Schedule H Individual, Part II, line 12)
 Income from annuities and pensions social security No. Total of withholding statements with this return Gain (or loss) from industry or business (Submit Schedule K Individual) Spouse's occupation Distributable share on special partnerships losses (Submit Schedule R) R) Qualified plans and variable Aminumy control (Submit Schedule Q1).
S) Net long-term capital gain on Investment Funds (Submit Schedule Q1).
S) Net long-term capital gain on Investment Funds (Submit Schedule Q1). Zip Code 00769-0782 Zp Code 00769-0000 Gain (or loss) from rental business (Submit Schedule N Individual) Second Last Name Gain (or loss) from farming (Submit Schedule L Individual) 3. Total Gross Income (Add lines 18, 1C and 2A through 2S) Government, Municipalities or Public Corporations Employee Interest income (Schedule F Individual, Part I, line 10) Miscellaneous income (Submit Schedule F Individual). Adjusted Gross Income (Subtract line 4 from line 3) Resident of Puerto Rico at the end of the year?
Obligation to make payments to ASUME?
Other exempt income? (Submit Schedule)
Indicate total \$\frac{1}{2}\$ 6110 Torres Cardenales Alimony received (Payer's social security No. 4. Alimony Paid (Recipient's social security No. 5. Adjusted Gross Income Political Paid (Recipient's social security No. 5. Adjusted Gross Income Political Paid (Recipient P Place label here E. B Government, Municipalities or Pl. Properties of Pl. Private Business Employee G. Private Business Employee Last Nam < Number, Street HIGHEST SOURCE OF INCOME: Teacher Man Other Income (or Losses): 8 FORM Home Address (Town or Urbanization, N. Hacienda Miraflores Coamo PR 5 Z SONG CONG Your occupation 20000 PO Box 782 Coamo PR 9900 Antonio Postal Address 8 50000E

Part 1

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Part 2

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Form 482.0 Rev.

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W-2 PR GOBIERNO DE PUERTO RICO - GO DEPARTAMENTO DE HACIENDA - D COMPROBANTE DE RETENCION	Exhibit Page 4 (VERNMENT OF THE TREASURY • WITHHOLDING STATEMENT	INFORMACION PARA EL DEPARTAMENTO DE HACIENDA DEPARTMENT OF THE TREASURY INFORMATION	INFORMACION PARA EL SEGURO SOCIAL SOCIAL SECURITY INFORMATION
-First Name NIO	3. Núm. Seguro Social Social Security No.	7. Sueldos - Wages 33458.72	17. Total Sueldos Seguro Social Social Security Wages
s) - Surname(s) RES: CARDENALES	4. Núm. de Ident. Patronal Employer Ident. No. (EIN) 660433481	8. Comisiones - Commissions 0 , 0 0 9. Concesiones - Allowances	0.00 18. Seguro Social Retenido Social Security Tax Withheld
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UINA CALAF O REY, PR 00919	Charitable Contributions 12.00 Copia C para Récord	15. Aportaciones a Planes Cualific. Contributions to CODA PLANS 0.00	22. Seguro Social no Retenido en Propinas - Uncollected Social Security Tax on Tips
o de Teléfono del Patrons ver's Telephone Number	del Empleado Copy C for Employee's	16. Salarios bajo Ley Núm. 324 de 2004 Salaries under Act No. 324 of 2004 0 . 0 0	0.00
Cese de Operaciones: Dig. Mes Año e of Operations Date: Day Month Yeor	Records	16A. Aportaciones al Programa Ahorra y Duplica tu Dinero - Contributions to the Save and Double your Money Program	23. Contrib. Medicare no Retenida en Propinas - Uncollected Medicare Tax on Tips 0.00
1164590 8 2	Year: 2011	0.00	CONTRATO GOBIERNO:
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Case:17-03283-LTS Doc#:12344-1 Filed:03/13/20 Entered:03/16/20 10:53:57 Desc: Exhibit Page 6 of 11 Estado Libre Asociado de Puerto Rico Grupo de Pago: SM -Quincenal # Cheque: 06330151 080 - DEPT DE EDUCACION-MAESTROS Desde-12/09/2013 * 12/20/2013 12/17/2013 Hasta: Fecha: ANTONIO L TORRES CARDENALES # Empleado: A. LIT.C. DATA IMP: Federal PR APARTADO 782 8005137-SANTA ISABEL-PONCE Dept: Estado Civil: Head of Household COAMO PR 00769 Oficina: SUSANA RIVERA Concesiones: 0 2 Titulo: DEPARTAMENTO DE EDUCACION Pct. Adcl.: Sueldo: \$2,705.00 Monthly Cant. Adcl.: HORAS E INGRESOS IMPLESTOS Corriente ----- Acumulado -----Descripcion Sueldo Horas Ingresos Horas Descripcion Corriente Acumulado Bono de Navidad 0.00 1.000.00 PR Withholdng 0.00 939.77 0.00 1,476.00 32,460.00 Pago de Salarios Regulares 0.00 2,184.14 Licencia Enfermedad en Exceso Total: 0.00 1,476.00 35,644.14 0.00 939.77 DEDUCCIONES DEDUCCIONES GENERALES PENEFICIOS PATRONALES PAGADOS Descripcion Corriente Acumulado Descripcion Corriente Acumulado Descripcion Corriente Acumulado GPR Plan de Retiro de Maestro 0.00 2,921.52 **DUM-Gob Otras Deducciones** 611.59-611.59-SM-Asoc Maestros de PR 0.00 1,440.00 766.00 SM-Asoc Maestros de PR 0.00 GPR Plan de Retiro de Maestro 0.00 2,759.04 Ahorros-AEELA 0.00 973.92 FSED Disability Plan 0.00 605.89 DM-FONDOS UNIDOS 0.00 8.00 SC-MULTINATIONAL LIFE INS. 0.00 131.00 AE-Asoc Emp ELA-Prest Regular 0.00 421.89 SC-GENERAL ACCIDENT LIFE 0.00 109.62 2,921.52 Total: * Tributable Total: 0.00 611.59-1,798.84 TOTAL BRUTO TOTAL IMPUESTOS DEDUCCIONES TOTALES PAGA NETA Corriente: 0.00 0.00 611.59-611.59 35,644.14 939.77 Acumulado 4,720,36 29,984.01 PTO HORAS ACLM DISTRIBUCION PAGA NETA Balance Inicial: 0.0 Cheque #06330151 611.59 + Acumulado: 611.59 Total:

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, PR 00769	Costo de cubierta de salud auspiciada por el patrono - Cost of employer-sponsored	10. Propinas - Tips 0 . 0 0 11. Total=7+8+9+10 32999 . 51 12. Gastos Reemb. y Beneficios Marginales Reimb. Expenses and Fringe Benefits		19. Total Sueldos y Pro. Medica Medicare Wages and Tips	
p. V.T.C.	health coverage 0.00				
Di in Postal del Patrono	6. Donativos Charitable Contributions 0.00				
and Mailing Address DE EDUCACION - MAESTROS DA TENIENTE CESAR GONZALE	Patrono: - Employer: * Envie a: - Send to:	13. Cont. Retenida	0.00 Tax Withheld 713.02	20. Contrlb. Medicare Retenida Medicare Tax Withheld	
NA CALAF REY, PR 00919	Social Security Administration Data Operations Center Wilkes- Barre, PA 18769-0001	14. Fondo de Retiro Governmental Re	etirement Fund	0.00	
Teléfono del Patrono Telephone Number	Con la With the W-3PR * Envie al Departamento de Hacienda electrónicamente	2916.07 15. Aportaciones a Pianes Cualific. Contributions to CODA PLANS 0.00 Salarios Exentos (Ver Instrucciones) Exempt Salaries (See instructions)		21, Propinas Seguro Social Social Security Tips 0 . 00	
de Operaciones: Dio Mes Año erations Date: Doy Month Year	Send to Department of the Treasury electronically (www.hacienda.pr.qoy)			22. Seguro Social no Retenido en Propinas - Uncollected	
firmación de Radicación Electrónica iling Confirmation Number	Entregue dos copias al empleado Deliver two copies to employee	Código/Code	. 0.00	Social Security Tax on Tips	
S160021	Conserve copia para sus récords Keep copy for your records	Código/Code	0.00	23. Contrib. Medicare no Retenid	
006251777	Año: 2016	16B. Aportaciones al Programa Ahorra y Duplica tu Dinero - Contributions to the Save and Double your Money Program		en Propinas - Uncollected Medicare Tax on Tips 0 . 0 0	
echa de radicación: 31 de enero - Fili	ng date: January 31		0.00	oducido por: Departamento de Hacienda	
PR ESTADO LIBRE ASOCIADO DE PUERTO DEPARTAMENTO DE HACIENDA - I COMPROBANTE DE RETENCIO	RICO - COMMONWEALTH OF PUERTO RICO DEPARTMENT OF THE TREASURY N - WITHHOLDING STATEMENT	INFORMACION PA DEPARTAMENTO I DEPARTMENT OF INFORMATION	DE HACIENDA	INFORMACION PARA EL SEGURO SOCIAL SOCIAL SECURITY INFORMATION	
est Name	3. Núm. Seguro Social	7. Sueldos - Wages	32999.51	17. Total Sueldos Seguro Social Social Security Wages	
0	The state of the s	8. Comisiones - Com	missions 0.00	0.00	
cardenales	4. Núm, de Ident. Patronal Employer Ident. No. (EIN)	9. Concesiones - Allo		18. Seguro Social Retenido	

2 PR ESTADO LIBRE ASOCIADO DE PUERTO DEPARTAMENTO DE HACIENDA - COMPROBANTE DE RETENCIO	RICO - COMMONWEALTH OF PUERTO RICO DEPARTMENT OF THE TREASURY N - WITHHOLDING STATEMENT	INFORMACION PARA EL DEPARTAMENTO DE HACIENDA DEPARTMENT OF THE TREASURY INFORMATION	INFORMACION PARA EL SEGURO SOCIAL SOCIAL SECURITY INFORMATION	
irst Name	3. Núm. Seguro Social	7. Sueldos - Wages	17. Total Sueldos Seguro Social Social Security Wages	
10	AUTO	8. Comisiones - Commissions 0 . 0 0	0.00	
Surname(s) 5 CARDENALES	4. Núm, de Ident. Patronal Employer Ident. No. (EIN) 660433481	9. Concesiones - Allowances 0.00	18. Seguro Social Retenido Social Security Tax Withheld	
istal del Empleado-Employee's Mailing Address ADO 782	Costo de cubierta de salud auspiciada por el patrono - Cost of employer-sponsored	10. Propinas - Tips 0 . 0 0	0.00	
A.L.T. C.	el patrono - Cost of employs spendenhealth coverage 0.00	11. Total=7+8+9+10 32999.51	19. Total Sueldos y Pro. Medicare	
cimiento Dio Mes Año Day Month Year	6. Donativos Charitable Contributions	12. Gastos Reemb. y Beneficios Marginale Reimb. Expenses and Fringe Benefits 0.00	0.00	
Dirección Postal del Patrono 3 Name and Mailing Address	Patrono: - Employer: - Envie a: - Send to:	13. Cont. Retenida - Tax Withheld 713.02	20. Contrib. Medicare Retenida Medicare Tax Withheld	
DE EDUCACION - MAESTROS NA TENIENTE CESAR GONZALE	Social Security Administration Data Operations Center Wilkes- Barre, PA 18769-0001	14. Fondo de Retiro Gubernamental Governmental Retirement Fund 2916.07	0.00	
LEY, PR 00919	Con la With the W-3PR Fovie al Departamento de Hacienda	15. Aportaciones a Planes Cualific. Contributions to CODA PLANS 0.00	21. Propinas Seguro Social Social Security Tips 0.00	
felephone Number Je Operaciones: Dia Mes Año rations Date: Day Month Yeor	electronicamente Send to Department of the Treasury electronically (www.hacienda.pr.gov) Entregue dos copias al empleado	Salarios Exentos (Ver Instrucciones Exempt Salaries (See instructions) Código/Code 16. 0.00	Social Security Tax on Tips	
firmación de Radicación Electrónica ling Confirmation Number	Entregue dos copias Deliver two copies to employee Conserve copia para sus récords Keep copy for your records	Código/Code . 0.00	23. Contrib. Medicare no Retenida en Propinas - Uncollected	
9160021 701 - Cohtrol Number 006251777	.Año: 2016 Year:	16B. Aportaciones al Programa Ahorra Duplica tu Dinero - Contributions to th Save and Double your Money Program 0.00	Medicare Tax on Tips 0.00	
Fecha de radicación: 31 de enero - Filir	ng date: January 31			

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O Control of the forms of the balance of Education of Education of the particular sentence of the part	opological (0.00	Keeb cotà tot Aont tecotqs Couseixa cobis bais ara gco.qs Dejlati (Aco cobises jo sustantico	Número Confirmación de Radicación Electrónica Electronic Filing Confirmation Mumber S1 70008
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O.O	OD O	Envie al Departamente : Becti onicamente : Send to Departament of the Treasury	Número de Telefrono del Patrono (787) 773-3508 Employer's Telephone Number
lstruð orugað asangar 5.15. ap 1. yfnic pð Íslog 2	14. Fondo de Reliro Gubernantalis Governmental Fund Governmentalis Relirementalis 12. 19.3.12 15. Aportaciones a Pignes Cuertilis Contribulions to CODA PLANS	Data Operations Center Wilkes-Barre, PA 18769-0001 Con la With the W-3PR	DEPT DE EDUCACION MAESTROS AVENIDA TENIENTE CESAR ESQUINA CALAF ESQUINA CALAF ETO REY PR 00919
Confide Medicare Relentes Medicare Co Villando	716.20	Patrono: - Employer: - Envie s: - Sand to: Social Security Administration	2. Nombre y Dirección Postal del Patrono Employer's Name and Mailing Address
00.0	States Reemby Benchos Marginsker St. Gastos Bartel's Rein's Expenses and Frings Bartel's CO.00	Charlable Contributions 0.00	COAMO PR 00769 Fecha de Nacimiento: Dia Mes Año Pare Of Birth: Day Month Year
Total Sueld 17 Pro Medicare	116.140,88	00.0 sovileno .8	S87 ODATAAA
00.0	acif - asniqor9 .0	Experience of persons and suspenses Experience of employers Experience of employers Experience of persons of the persons of	Dirección Postal del Empleado - Employee's Mailing Address
Segum Seuty Retendo	00.0	Employer Ident No. (EIN)	L TORRES CARDENALES
00.0	Comissiones - Comissions 0.00	c. Núm. de Ident. Patronal	Apellido(s) - Last Name(s)
otal Social Security Wages	76.140,EE	Social Security No. A. L.T. C	ΟΙΝΟΤΝΑ
T SECIOSI ATRIBUSANT HON	NOTAWASH TARKET SOCIA		PR-2M-2PR COMPROBANTE DE RETENCIÓN - W COMPROBANTE DE RETENCIÓN - W COMPROBANTE DE RETENCIÓN - W COMPROBANTE DE RETENCIÓN - W

99R-2/W-2PR GOSIERNO DE PUERTO RICO-GOV DEPARTAMENTO DE HACIENDA-DE COMPROBANTE DE RETENCIÓN	PARTMENT OF THE TREASURY	INFORMACIÓN PARA EL DEPARTAMENTO DE HACIENDA - DEPARTMENT OF THE TREASURY INFORMATION	INFORMACIÓN PARA EL SEGURO SOCIAL SOCIAL SECURITY INFORMATION
1. Nombre - First Name		7. Sueldos - Wages 34,546.90	17. Total Sueldos Seguro Social Social Security Wages
ANTONIO L	3. Núm. Seguro Social Social Security No. A. L.T.	-8. Comisiones - Commissions 0.00	0.00
Apellido(s) - Last Name(s)	Núm. de ldent. Patronal Employer ident. No. (EIN)	9. Concesiones - Allowances 0.00	18. Seguro Social Retenido Social Security Tax Withheld
TORRES CARDENALES	66-0433481	10. Propinas - Tips	
Dirección Postal del Empleado - Employee's Mailing Address	 5. Costo de cubierta de salud auspiciada por el patrono - Cost of employer- sponsored health coverage 	11. Total = 7 + 8 + 9 + 10 34,546.90	19. Total Sueldos y Pro. Medicare Medicare Wages and Tips 0.00 20. Contrib. Medicare Retenida
APARTADO 782	0.00	12. Gastos Reemb. y Beneficios Marginales	
COAMO PR 00769 A. L.T. C.	6. Donativos Charitable Contributions	0.00	
Fecha de Nacimiento: Día Mes Año Date of Birth: Day Month Year	0.00	13. Cont. Retenida - Tax Withheld 839.32	
Nombre y Dirección Postal del Patrono Employer's Name and Mailing Address DEPT DE EDUCACION MAESTROS	Patrono: • Employer: Indique si la remuneración incluye pagos al empleado por:	14. Fondo de Retiro Gubernamental Governmental Retirement Fund 3,021.55	Medicare Tax Withheld
AVENIDA TENIENTE CESAR ESQUINA CALAF HATO REY, PR 00919-0000	A- Servicios prestados por un médico cualificado bejo la Ley 14-2017 Services rendered by a qualified physician under Act 14-2017	Aportaciones a Planes Calificados Contributions to CODA PLANS 0.00	Propinas Seguro Social Social Security Tips O.0 Seguro Social no Retenido en Propinas - Uncollected
Número de Teléfono del Patrono Employer's Telephone Number		Salarios Exentos (Ver instrucciones) Exempt Salaries (See instructions)	
Fecha Cese de Operaciones: Día Mes Año Cease of Operations Date; Day Month Year		16. 0.00	
Número Confirmación de Radicación Electrónica Electronic Filing Confirmation Number	B- Servicios domésticos Domestic services	Códgo/Code 16A. 0.00	Social Security Tax on Tips
F0717193216	C- Otros/Others	Código/Code 0.00	23. Contrib. Medicare no Retenida
Número Control - Control Number 180048791	Año: 2018	16C. Aportaciones al Programa Ahorra y Duplica tu Dinero - Contributions to the Save and Double your Money Program	en Propinas - Uncollected Medicare Tax on Tips
Fecha de radicación: 31 de enero - Filing date: January 31	Year: 2010	0.00	0.0

